## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL030120 US

As a below named inventor, I h	ereby declare that:		* · · · · · · · · · · · · · · · · · · ·	
My residence, post office address and citizenship are as stated next to my name.				
I believe I am the original, first a plural names are listed below) of entitled: "APPARATUS AN the specification of which (check the specification of which the specification of which (check the specification of which (check the specification of which the specification of which (check the specification of which the specification of which (check the specification of which the specification of which (check the specification of which the specification of which the specification of which (check the specification of which the specification of which the specification of which (check the specification of which the	of the subject matter which is a ID METHOD FOR BLOO	name is listed below) or an original, firs claimed and for which a patent is soug D ANALYSIS''	et and joint inventor (if the hot on the invention	
is attached hereto.				
was filed as United States a	pplication			
Serial No -				
on				
and was amended				
on				
	nal application		**	
Number PCT/IB2004/05				
On 19 January 200				
and was amended under PCT	Article 19			
on			(if applicable).	
I hereby state that I have review claims, as amended by any am		nts of the above-identified specification	n, including the	
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).				
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:				
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:				
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	03100249.6	6 February 2003	YES	
	L	<u> </u>		

1 5 4 4 5 Combined Declaration For Patent Application and Power of Attorney (Continued) Attorneys Docket Number **PHNL030120 US** (includes Reference to PCT International Applications) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) Direct Telephone Calls to: Jack E. Haken, Reg. No. 26,902 (name and telephone number) Michael E. Marion, Reg. No. 32,266 (914)332-0222 Edward M. Blocker, Reg. No. 30,245 SECOND GIVEN NAME FULL NAME OF FIRST GIVEN NAME FAMILY NAME **INVENTOR** Wilhelmus **Gerhardus LUCASSEN** STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP **RESIDENCE &** CITY 201 CITIZENSHIP The Netherlands The Netherlands Eindhoven STATE & ZIP CODE/COUNTRY POST OFFICE POST OFFICE ADDRESS CITY ADDRESS 5656 AA Eindhoven The Netherlands Prof. Holstlaan 6 SECOND GIVEN NAME FIRST GIVEN NAME **FULL NAME OF** FAMILY NAME INVENTOR Jan **PUPPELS** Gerwin STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & CITY 202 CITIZENSHIP The Netherlands The Netherlands Rotterdam STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS POST OFFICE **ADDRESS** The Netherlands 3066 KG Rotterdam Prinsenlaan 618 **FULL NAME OF** SECOND GIVEN NAME **FAMILY NAME** FIRST GIVEN NAME **INVENTOR** VAN DER VOORT Mariolein STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP **RESIDENCE &** CITY 203 CITIZENSHIP The Netherlands The Netherlands Eindhoven STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS POST OFFICE ADDRESS The Netherlands 5656 AA Eindhoven Prof. Holstlaan 6 FIRST GIVEN NAME SECOND GIVEN NAME FAMILY NAME **FULL NAME OF INVENTOR WOLTHUIS** Rolf STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP 204 **RESIDENCE &** CITIZENSHIP The Netherlands The Netherlands Rotterdam STATE & ZIP CODE/COUNTRY POST OFFICE ADDRESS POST OFFICE CITY **ADDRESS** 3021 XV Rotterdam The Netherlands Volmarijnstraat 86 B I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon. SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 202 Mvander Voort DATE 02 September 2004 <u>02 September 2004</u>

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

SIGNATURE OF INVENTOR 204

DATE

## COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER PHNL030120 US

As a below named inventor, I hereby declare that:				
My residence, post office address and citizenship are as stated next to my name.				
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "APPARATUS AND METHOD FOR BLOOD ANALYSIS" the specification of which (check only one item below):				
is attached hereto.				
☐ was filed as United States a	pplication			
Serial No -			<del></del> ;	
on	······			
and was amended		•		
on		40.11		
	nal application			
Number PCT/IB2004/05				
On 19 January 200				
To daridary 200				
and was amended under PCT	Article 19			
on			(if applicable).	
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.  I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).  I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or				
any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:				
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:				
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119	
Europe	03100249.6	6 February 2003	YES	
		1	1	

Combined Declaration For Patent Application and Power of Attorney (Continued)  Attorneys Docket Number						
(includes Reference to PCT International Applications)  PHNL030120 US  POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact						
POWI all bus	R OF ATTORNE iness in the Patent a	Y: As a named inventor, and Trademark Office con	I hereby appoint nnected therewith	the following attorney(s) and/o . (List name and registration no	or agent(s) to pro umber)	secute this application and transact
	E. Haken, Reg.					phone number)
Michael E. Marion, Reg. No. 32,266 Edward M. Blocker, Reg. No. 30,245						
FULL NAME OF		FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
201	INVENTOR	LUCASSEN		Gerhardus		Wilhelmus
	RESIDENCE & CITIZENSHIP	CITY Eindhoven		STATE OR FOREIGN COUNTRY  The Netherlands		COUNTRY OF CITIZENSHIP The Netherlands
	POST OFFICE POST OFFICE ADDRE		ESS	CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaar	า 6	5656 AA Eindhove	en	The Netherlands
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
	INVENTOR	PUPPELS		Gerwin		Jan
202	RESIDENCE &	CITY		STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Rotterdam		The Netherlands		The Netherlands
	POST OFFICE	POST OFFICE ADDRE		CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Prinsenlaan 6'	18	3066 KG Rotterda	m	The Netherlands
FULL NAME OF INVENTOR		FAMILY NAME VAN DER VOORT		FIRST GIVEN NAME  Marjolein		SECOND GIVEN NAME
203	RESIDENCE & CITY			STATE OR FOREIGN COU	NTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven	Eindhoven			The Netherlands
	POST OFFICE			CITY		STATE & ZIP CODE/COUNTRY
ADDRESS Prof. Holstlaa		n 6 5656 AA Eindhover		en	The Netherlands	
FULL NAME OF FAMILY NAME INVENTOR WOLTHUIS			FIRST GIVEN NAME ROIF		SECOND GIVEN NAME	
204	RESIDENCE &	& CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	CITIZENSHIP			The Netherlands		The Netherlands
	POST OFFICE	POST OFFICE ADDRI	ESS	CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Volmarijnstraa	at 86 B	3021 XV Rotterda	m	The Netherlands
true: a	and further that these	e statements were made der section 1001 if Title 1	with the knowledge	ge that willful false statements	and the like so r	formation and belief are believed to be nade are punishable by fine or its may jeopardize the validity of the
SIGNATURE OF INVENTOR 201 SIGNATURE OF			F INVENTOR 202 SIGNA		URE OF INVENTOR 203	
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DATE DATE CO Septe		ember 2004 DATE				
SIGNATURE OF INVENTOR 204						
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DATE						

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "APPARATUS AND METHOD FOR BLOOD ANALYSIS"  the specification of which (check only one item below):			
is attached hereto.			
☐ was filed as United States a	pplication		
Serial No			
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and was amended			
on			-
	al application		
Number PCT/IB2004/05	50034		
On 19 January 200	)4		
and was amended under PCT	Article 19		
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I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.			
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_	_	States Code, § 119 of any foreign app	lication(s) for patent
or inventor's certificate or of any	y PCT international applicatior	n(s) designating at least one country o	ther than the United
States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me			
on the same subject matter having a filing date before that of the application(s) of which priority is claimed:			
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:			
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119
Europe	03100249.6	6 February 2003	YES

Comb	Combined Declaration For Patent Application and Power of Attorney (Continued)  Attorneys Docket Number					Attorneys Docket Number PHNL030120 US
(includes Reference to PCT International Applications)  POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact						
all business in the Patent and Trademark Office connected therewith. (List name and registration number)						
Jack	Jack E. Haken, Reg. No. 26,902 Direct Telephone Calls to:					
	el E. Marion, R				(name and tele (914)332-02	ephone number)
Edwa	rd M. Blocker, F		1 '		(914)332-02	
201	FULL NAME OF INVENTOR	FAMILY NAME LUCASSEN		FIRST GIVEN NAME  Gerhardus		SECOND GIVEN NAME , Wilhelmus
	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven		The Netherlands		The Netherlands
	POST OFFICE	POST OFFICE ADDRESS		CITY		STATE & ZIP CODE/COUNTRY
	ADDRESS	Prof. Holstlaan 6		5656 AA Eindhoven		The Netherlands
	FULL NAME OF	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME
202	INVENTOR	PUPPELS		Gerwin		Jan
	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Rotterdam		The Netherlands		The Netherlands
	POST OFFICE ADDRESS	Prinsenlaan 618		CITY		STATE & ZIP CODE/COUNTRY
				3066 KG Rotterda	m	The Netherlands
203	FULL NAME OF INVENTOR	VAN DER VOORT		FIRST GIVEN NAME  Marjolein		SECOND GIVEN NAME
	RESIDENCE &	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Eindhoven		The Netherlands		The Netherlands
	POST OFFICE	POST OFFICE ADDRESS Prof. Holstlaan 6		5656 AA Eindhoven		STATE & ZIP CODE/COUNTRY
	ADDRESS					The Netherlands
	FULL NAME OF INVENTOR	FAMILY NAME WOLTHUIS		FIRST GIVEN NAME ROIF		SECOND GIVEN NAME
204	RESIDENCE &	Rotterdam POST OFFICE ADDRESS Volmarijnstraat 86 B		STATE OR FOREIGN COUNTRY The Netherlands CITY 3021 XV Rotterdam		COUNTRY OF CITIZENSHIP
	CITIZENSHIP					The Netherlands
	POST OFFICE					STATE & ZIP CODE/COUNTRY
	ADDRESS					The Netherlands
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.						
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNAT	SIGNATURE OF INVENTOR 203	
DATE		DATE		DATE	DATE	
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(July 1994)